## of the barbs formed in the suture is about 30 microns to about 100 microns,

- (b) pushing the first surgical needle to extend along an intended line of support and then out of the tissue at a point spaced from the tissue separation, then gripping the needle from its point end and pulling the needle out of the tissue, leaving said second portion of the suture extending in the tissue separation,
- (c) repeating the procedure of step (a) at the opposite side of the open wound, using the second surgical needle, at a position located across the tissue separation from the position in which the first needle was inserted,
- (d) repeating step (b) at said opposite side of the tissue separation, to the extent that said second portion of the suture is drawn through tissue at said opposite side of the separation, with the second surgical needle,
- (e) bringing the two tissue portions together, while drawing one or both of the surgical needles outwardly from the wound until the two portions of the suture are located substantially in respective tissue portions at opposed sides of the separation and the suture is drawn substantially tight so as to bind the two tissue portions together in a substantially closed position, and
- (f) severing the suture from the two surgical needles.

18.(Amended) [The surgical method of claim 16] A surgical method for supporting skin and adjacent subcutaneous tissue of a patient in a facelist operation, comprising:

selecting one or more paths through the patient's tissue on which lines of tissue support are desired,

selecting a surgical needle of sufficient length to be inserted through a first of such selected paths in the tissue, the surgical needle having a trailing end secured to a one-way suture which has a multiplicity of exterior barbs providing for gripping of the tissue in one direction only, the barbs permitting movement of the suture through the tissue in the direction the needle is inserted,

pushing the needle into the tissue, below the skin and along the selected path for the desired line of tissue support, until the needle extends out through the skin at a distal end of the selected path,

gripping the needle from its point end and pulling the needle out of the patient's tissue, leaving the one-way suture lying within the tissue along the selected path,

severing the suture from the surgical needle, at a point below the skin, leaving a leading end of the one-way suture hidden beneath the skin at said distal end of the selected path,

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as needed for the particular facelift operation, inserting a needle in additional selected paths for additional desired lines of tissue support, to place additional one-way sutures below the skin at said additional desired lines of tissue support,

applying tension to the trailing end of each suture, to engage the barbs against the internal tissue along said one or more desired lines of tissue support, and securing the trailing end of each suture, in the tensioned condition, such that the desired line of support is placed in tension to provide the desired tissue support, wherein the trailing end of each suture is secured to a trailing end of another one-way suture which extends in essentially [an opposite] another direction.

60.(Amended) [The surgical method according to claim 16] A surgical method for supporting skin and adjacent subcutaneous tissue of a patient in a facelist operation, comprising:

selecting one or more paths through the patient's tissue on which lines of tissue support are desired,

selecting a surgical needle of sufficient length to be inserted through a first of such selected paths in the tissue, the surgical needle having a trailing end secured to a one-way suture which has a multiplicity of exterior barbs providing for gripping of the tissue in one direction only, the barbs permitting movement of the suture through the tissue in the direction the needle is inserted,

pushing the needle into the tissue, below the skin and along the selected path for the desired line of tissue support, until the needle extends out through the skin at a distal end of the selected path,

gripping the needle from its point end and pulling the needle out of the patient's tissue, leaving the one-way suture lying within the tissue along the selected path,

severing the suture from the surgical needle, at a point below the skin, leaving a leading end of the one-way suture hidden beneath the skin at said distal end of the selected path,

as needed for the particular facelift operation, inserting a needle in additional selected paths for additional desired lines of tissue support, to place additional one-way sutures below the skin at said additional desired lines of tissue support,

applying tension to the trailing end of each suture, to engage the barbs against the internal tissue along said one or more desired lines of tissue support, and securing the trailing end of each suture, in the tensioned condition, such that the desired line of support is placed in tension to provide the desired tissue support for supporting skin and adjacent subcutaneous tissue of a patient in a facelift operation, said method further including[:] providing tissue support in the facelift operation from the sutures themselves.

85.(Amended) A surgical method for supporting skin and adjacent subcutaneous tissue of a patient in a facelift operation, comprising:

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selecting one or more paths through the patient's <u>skin and adjacent subcutaneous</u> tissue on which lines of tissue support are desired;

selecting a first surgical needle of sufficient length to be inserted through a first of such selected paths in the tissue, the first surgical needle having a trailing end wherein a double-armed suture extends between and has its ends secured to the trailing ends of the first surgical needle and a second such surgical needle, the two needles oriented in opposite directions, the suture having said exterior barbs oriented in one direction for a first portion of the length of the suture and in the opposite direction for a second portion of the length of the suture, each portion having the barbs oriented so as to allow movement of that portion of the suture through the tissue in the same direction in which the needle secured to that portion of the suture is inserted;

pushing the first needle into the tissue, below the skin and along the selected path for the desired line of tissue support, until the first needle extends out through the skin at a distal end of the selected path;

pulling the first needle out of the patient's tissue, leaving the first portion of the suture lying within the tissue along the selected path;

as needed for the particular facelift operation, inserting the second needle in an additional selected path through the patient's skin and adjacent subcutaneous tissue for an additional desired line of tissue support, to place the second portion of the suture below the skin at said additional desired line of tissue support, until the second needle extends out through the skin at a distal end of the additional selected path;

pulling the second needle out of the patient's tissue, leaving the second portion of the suture lying within the tissue along the additional selected path;

applying tension to the suture, to engage the barbs against the internal tissue along said one or more desired lines of tissue support, in the tensioned condition, such that the desired lines of support are placed in tension to provide the desired tissue support, and

severing the suture from each needle.

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## STATUS OF CLAIMS AND SUPPORT FOR CLAIM CHANGES UNDER 37 CFR §1.173

Claims 1-26, 60-65 and 74-105 are pending in the application.

Claim 9 is amended by adding the feature that the suture is about 100 microns to about 500 microns in diameter, and the depth of the barbs formed in the suture is about 30 microns to about 100 microns. Support for this amendment may be found, for example, at column 4, lines 57 and 58, and column 8, lines 13-19, of the '855 patent.

Claims 18 and 60 are amended so as to incorporate the elements of base independent claim 16.

Claim 85 is amended to recite that the path of the suture in the claimed facelift operation is through the patient's skin and adjacent subcutaneous tissue. Support for this amendment is found in the preamble of claim 85.

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